

table. She removes all instruments from the table, with the exception of the condensers, carvers, mirror, explorer, and cotton pliers.

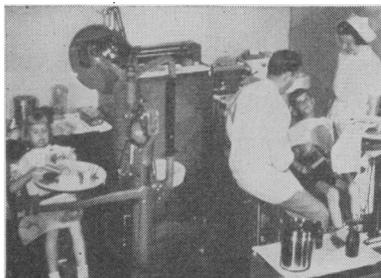
The filling material, in this instance alloy, is placed in the prepared cavity by the chairside assistant. As she places each carrierful, she hands the operator the condensers in the sequence in which he uses them.

During the carving of the filling, the chairside assistant hands the carvers to the operator in proper sequence, at the same time using the air syringe to blow away the amalgam scrapings.

Operators must develop techniques in which they use a minimum number of instruments and make proper use of such instruments to avoid confusing the chairside assistant. In this way the average assistant is soon able to anticipate the operator's every need.

While the chairside assistant is providing the afore-mentioned services, the second assistant is busy elsewhere in the clinic with such duties as preparing the next patient for treatment, cleaning and sterilizing instruments, mixing amalgam or cement, developing X-rays, or performing any one of the other innumerable duties. She also is capable of substituting for the chairside assistant at any time that it becomes necessary.

### ***Film Demonstrates Use of Dental Assistants***



**Title: Dental Assistants—Their Effective Utilization, 16-mm., sound, color, 20 minutes, 1951 . . . Audience: dentists, dental assistants, dental students . . . Available by loan through State health departments; by purchase from Byron, Inc., 1226 Wisconsin Avenue, NW., Washington, D. C.**

These pictures from the Public Health Service motion picture show how dental assistants were used in the 5-year dental health demonstration project in Richmond, Ind., sponsored by the city, the State health department, and the Public Health Service's Division of Dental Public Health.

The advantages to both dentist and patient of using two chairs and two dental assistants are shown for several dental procedures.

Every effort is made to conserve the time of the dentist. Each operation is analyzed to determine just which parts of the work should be delegated to assistant personnel.

### **Time and Motion Saved**

In preparing the script of a motion picture (see illustrations) of the clinical aspects of the Richmond study, it was necessary to list the activities of the dentist, the chairside or first assistant, and the roving or second assistant. Including the seating of the patient, anesthesia, cavity preparation, the filling of three teeth with amalgam, carving of fillings, and dismissal of the patient, the number of activities were as follows: dentist, 33; first assistant, 57; second assistant, 39. The technique followed was routine; the number of instruments used and movements required were kept to a minimum consistent with high-quality service.

For this type of three-filling procedure, the difference in the workload when done by a dentist alone, with one, and with two assistants is shown in figure 2.

True, many of the activities performed by the dentist and the first assistant were synonymous, such as handling and receiving the various instruments. Such activities totaled 22,

The film does not attempt to present the technique of training dental assistants to the high degree of coordination and timing demonstrated in the film, but it does emphasize that this training is not difficult and that much can be accomplished in as little as 6 weeks.

The film underscores the concept that multiple chairs and assistants are one answer to the big question: "How can a limited number of dentists take care of an increasing number of people seeking dental attention?"

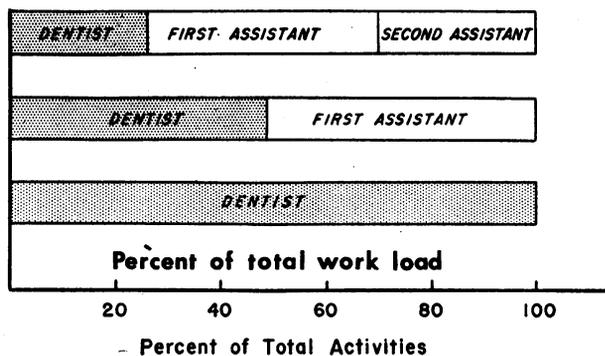


Figure 2. Effect of chairside assistance on dentist's workload.

leaving a total of 35 separate and distinct activities performed by the first assistant, which, if she were not constantly at the chairside, would have to be performed by the dentist. The activities did not include the necessary duties of the second assistant, such as preparing cement for the cement base, mixing amalgam, and cleaning and sterilization of instruments. Every conscious movement of efficiently utilized personnel should be a timesaver to the dentist.

### Comments

This type of routine, utilizing chairside assistants as developed in the Richmond study, should be readily adaptable to the average dental office. This routine necessarily will have to be adjusted to the type of practice; to the physical set-up, such as equipment and office arrangement; and to the dentist's operating techniques.

Practical experience with efficiently utilized auxiliary personnel will convince a large ma-

majority of the dental profession that here is a means of providing, quickly and economically, a great increase in dental care services to the population. It is a method which requires a minimum of effort by the dentist and yet will provide maximum economic returns.

### Summary

The demand for dental care services exceeds by far the present output of the dental profession.

It is unlikely that there will be any appreciable increase in the number of dentists in the foreseeable future.

The effective utilization of dental assistants presents an opportunity to bring about a substantial increase in dental care services.

Such a method is economical, readily available, and pleasant.

The use of dental assistants in the Richmond (Ind.) Dental Demonstration Study, their training, their duties, and their effectiveness, are described.

### REFERENCES

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## Persons With Eye Disabilities Successfully Employed

Under the State-Federal program for vocational rehabilitation, more than 8,000 men and women with eye disabilities that interfered with their livelihoods were rehabilitated into successful employment during the past fiscal year. One in ten of these men and women had never worked before their rehabilitation.

Since 1943, the State agencies, working in cooperation with the Office of Vocational Rehabilitation, Federal Security Agency, restored work ability to nearly 48,000 men and women with substantial visual impairments. About 18,500 of these rehabilitants were blind when they applied for services.